

State of California
Application for Milk Handler's
License - New Processor

Department of Food and Agriculture
Dairy Marketing Branch
1220 N Street, Room A-224
Sacramento, California 95814
(916) 654-1456/ FAX: (916) 654-0867
E-mail: dairy@cdfa.ca.gov

The undersigned hereby applies for a license pursuant to Chapter 2, Part 3, Division 21; or Chapter 1, Part 3, Division 21 of the Food and Agricultural Code

Two year License Fee \$25.00 for the Period Ending December 31,

Please print or type
Handler Number:

1. Date Business Started Operation: Telephone FAX Number E-mail Address:
2. Business Name DBA:
2a. Parent Company (If Applicable): Legal Entity (If Applicable):
3. Plant Location Zip Code
4. Business Mailing Address Zip Code

5. Check Appropriate Box Individual Partnership Corporation
6. Individual, Members of Partnership, or Officers of Corporations Must Answer the Following:
Name and Title Address Phone Number

7. If a Corporation, list names and address of persons holding more than 25% of the stock on a separate sheet.
7a. State Incorporated: 7b. Corporate No.: 7c. Date Incorporated:
8. Will you purchase or acquire ownership or control of milk in unprocessed or bulk form from a producer, a producer-handler, or another milk handler for the purpose of manufacturing, processing, sales, or other handlings? Yes or No (please circle one)

Table with 4 columns: Source of Bulk Raw Milk, Daily Gallons, Source of Bulk Raw Milk, Daily Gallons. Rows include Own production, Contract producers (Direct Shippers), and Name.

10. Have you entered into a written contract with all producers from whom bulk milk is purchased? Yes or No (Please circle one)

FOR NEW APPLICANTS ONLY (Questions 11 and 12 only)
Legal entity of license applicant and bond principal must be the same

11. Name of Bonding Company Telephone Number:
12. Amount of Bond \$

Answer all questions applicable to your business on the reverse side

13. Have you or any member of the partnership or officer of the corporation ever:
Been denied or refused a license? YES NO
Had a license revoked or suspended? YES NO
13c. If so, is payment still owed to any milk producers? YES NO

Received a conditional license?	YES	NO	13d. Have you ever failed to pay agricultural producers for their products?	YES	NO
Had payment made from a Surety Bond?	YES	NO			
13a. Have you or any member of the partnership or officer of the corporation ever been convicted of a felony?	YES	NO	14. Are you now or have you ever been licensed as a milk producer in any other state?	YES	NO
13b. Have you or any member of the partnership or the corporation received a 24-hour Demand Notice for failure to pay milk producers?	YES	NO			

If any of the above boxes are checked “yes”, explain fully on a separate sheet.

Application **must** be signed by the individual, by a member of the partnership, or an officer of the corporation under penalty of perjury.

Authorized Signature	Print Name	Title	Date
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The Department of Food and Agriculture has established time periods for the processing of permit applications, in compliance with Government Code sections 15374 - 15378. Failure to comply with these time periods may be appealed to the Secretary of Food and Agriculture, 1220 N Street, P. O. Box 942871, Sacramento, CA 94271-0001, pursuant to regulations set forth in Title 3, California Code of Regulations, section 301. Under certain circumstances, the Secretary may order that the applicant receive a reimbursement of filing fees.

**Attach check or money order to completed application and return to:
Cashier, Department of Food & Agriculture
P. O. Box 942872
Sacramento, CA 94271-0001**

FOR DEPARTMENT USE ONLY			
LICENSE #:	_____		
RC #:	_____	DATE:	_____
AMOUNT:	_____	LINE:	_____
LICENSE FEE:	_____	PENALTY:	_____
RC #:	_____	DATE:	_____
AMOUNT:	_____	LINE:	_____